Page of Pages STATE OF CALIFORNIA - Personal Administration TRAVEL EXPENSE CLAIM STD 262 A (REV 9/2007) DEPARTMENT SSAN OR EMPLOYEE NUMBER CLAIMANT'S NAME CalEMA Frank McCarton INDEX NUMBER **CB/ID NUMBER** DIVISION OR BUREAU POSITION 2000 Executive Office **Executive Office** HEADQUARTERS ADDRESS TELEPHONE NUMBER RESIDENCE ADDRESS (916) 845-8530 3650 Schriever Avenue ZIP CODE STATE CITY CITY STATE ZIP CODE Mather CA 95655 (3) MILAGE RATE CLAIMED: 2) PRIVATE VEHICLE LICENSE No.: (1) NORMAL WORK HOURS: 0.55 0800 - 1700 (10) TRAN SPORTA TION 11) (12)MEALS (8) 4) MONTH (7) BUSINESS TOTAL LODGING 0.T.,L/T (C) CARFARE, LOCATION 8/2009 EXPENSES PRIVATE CAR USE EXPENSE INCIDEN-COST OF TYPE N/C. RELO. BREAK-AMOUNT FOR DAY (5) DATE OR DINNER USED TOLLS. MILES WHERE EXPENSESES FAST LUNCH TALS TRANS. PARKING WERE INCURRED TIME 183.45 18.00 18.00 isc 125.50 10.00 Sacramento to Los 8/17/09 0900 Angeles 202.80 22.00 140.80 18.00 6.00 SC 6.00 10.00 Dana Point 8/18/09 40.00 18.00 6.00 SC & return 6.00 10.00 8/19/09 2100 426.25 40.00 11.95 12.00 54.00 266.30 12.00 30.00 (13) SUBTOTAL 426.25 CLAIM TOTAL REMARKS AND DETAILS (ATTACH RECEIPTS/VOUCHERS WHEN REQUIRED PLEASE NOTE: Travel advance was issued for this trip. Excess lodging request submitted prior to travel for 8/18/09. Business expense is for internet use.

8/17 - Los Angeles - participate in various meetings - 8/18-19 Dana Point - observe dress rehearsal for federally graded exercise at San Onofre Nuclear Generating

Station. AGENCY ACCOUNTING OFFICE USE ONLY PAID BY REV. FUND CHECK No.	PCA	PROJECT	WORK	OBJ AO	AMOUNT	TOTAL						
	99650			258	11.95	292	374.30	293	40.00			426.25
	33000		+		-	-						
			-									
	-				+			-				1
	-		+					+				
						-		-				
											+	-
											+	_
												-
									10.00			426.25
	TOTALS				11.95		374.30		40.00			426.23

(15) I HEREBY CERTIFY That the above is a true and if milage rates exceed the minimum rate, I certi 0751, 0752, 0753 and 0754 pertaining to vehicle	e statement of the travel expense as incur factorise the cost of operating the vehicle w y and seat belt usage.	rred by me in accordance with DPA rules in the service of the State of California. I ras equal to or greater than the rate claimed, and that I have met the requirements	If a privately owned as as prescribed by S	I vehicle SAM Se Í	was used, ctions 0750
	85/101.	(16) AJONATURE OF OFFICER APPROVING TRAVEL AND PAYMENT	DATE	31	109
(1/) SPECIAL EXPENDED OFFE	se .		DATE		'

to aux/15/109